Department of the Treasury

DLN: 93493135089728 OMB No 1545-0047

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private

▶ Do not enter social security numbers on this form as it may be made public

▶ Information about Form 990 and its instructions is at www.irs.gov/form990

Open to Public

Interna	ıl Reve	enue Service	F Information about	FOITH 990 and its instructions is at www	W 1N3 90V/I	0.111990		Inspection		
A F	or th	e 2017 c		ning 01-01-2017 , and ending 12-3	31-2017					
☐ Ad	dress	applicable change	C Name of organization AMERICAN MUSHROOM COOPERATIV	E		D Employ 23-306		ication number		
☐ In	me ch itial re		Doing business as							
		d return	Number and street (or P O box if ma	Il is not delivered to street address) Room/s	uite	E Telephor	ne number			
□ Ap	plicati	on pending	FIVE STATION AVE RM/STE 205 City or town, state or province, count	710 6		(610) 2	96-4211			
			BERWYN, PA 19312			G Gross re	eceipts \$ 1	,351,178		
			F Name and address of principal JOHN R CROOKS	officer		this a group re	turn for			
						bordinates? e all subordina	tes	□Yes ☑No		
 I Ta	x-exer	mpt status	☐ 501(c)(3) ☑ 501(c)(5) ◄ (Insert no)	in inc	luded?		Yes No		
J W	ebsit	te:► NOI		Insert no ; L 4947(a)(1) or L 527		"No," attach a oup exemption	•	•		
						· ·				
			✓ Corporation ☐ Trust ☐ Assoc	lation ☐ Other ►	L Year of fo	ormation 2001	M State	of legal domicile PA		
Pa	rt I	Sumi Briefly des	mary scribe the organization's mission or	most significant activities						
e)			ECONOMIC PROSPERITY IN THE M							
anc	:									
Activities & Governance	-									
69				continued its operations or disposed of g body (Part VI, line 1a)		.5% of its net a	ssets 3	l з		
×	1			the governing body (Part VI, line 1b)			4	3		
ties				endar year 2017 (Part V, line 2a) .			5	1		
Ϋ́	6	Total num	nber of volunteers (estimate if nece	essary)			6			
¥	7a	Total unre	elated business revenue from Part			7a	0			
	b	Net unrel	ated business taxable income from	Form 990-T, line 34		• •	7b			
		Ctll	constant (Book Mill book 41)			Prior Year		Current Year		
ē	1		ions and grants (Part VIII, line 1h) service revenue (Part VIII, line 2q)		96	728	1 159 050			
Rəvenue	1	-	ent income (Part VIII, inie 29)				14	1,159,050		
ä	1		venue (Part VIII, column (A), lines !	• •		130,		192,114		
	1		, , , , , , , , , , , , , , , , , , , ,	t equal Part VIII, column (A), line 12)		216,		1,351,178		
	13	Grants ar	nd similar amounts paid (Part IX, co	olumn (A), lines 1–3)				0		
	14	Benefits p	paid to or for members (Part IX, co	lumn (A), line 4)				0		
&	1		. , , ,	nefits (Part IX, column (A), lines 5–10)		111,	111,423 111,774			
Expenses	1		nal fundraising fees (Part IX, colum	, ,,				0		
Ä	1		raising expenses (Part IX, column (D), lin	· -		272				
	1	•	penses (Part IX, column (A), li nes 1 enses Add lines 13–17 (must equa			272, 383,		1,268,916		
	1	•	less expenses Subtract line 18 from	, , , , ,		-167,		-29,512		
გ გ					Beginn	ing of Current Y		End of Year		
Net Assets or Fund Balances	20	Tatal ass	ata (Davit V. Juna 16)			220	007	340,000		
AB	1		ets (Part X, line 16)			339,i 117,		348,888 157,297		
F E	1		s or fund balances Subtract line 2	1 from line 20		221,		191,591		
Pai	1111	Signa	ature Block			<u> </u>		<u> </u>		
	ledge	and belie		ned this return, including accompanying Declaration of preparer (other than off						
uny is		l k								
c:		Signati	* ure of officer			2018-05-08 Date				
Sign Here			RD LEO TREASURER r print name and title							
		P	rınt/Type preparer's name		Date		PTIN			
Paid	d](OSEPH A GIORDANO CPA	JOSEPH A GIORDANO CPA	2018-05-15	self-employed	P0057890	4		
Pre	-	er 📙	irm's name WHISMAN GIORDANO 8			Firm's EIN ► 20				
Use	On	ıly [⊩]	irm's address ► 111 CONTINENTAL DR S			Phone no (302)	∠66-0202			
)c	NEWARK, DE 19713433							
			this return with the preparer show duction Act Notice, see the sepa	•	Cat M	· · · · · · · · · · · · · · · · · · ·	<u>''</u>	(es No		
. J. F	abei	TOIN NE	and and more received acc mic acho	monacivilai	Cat IV	O IIZOZÍ		1 UIIII 33U (201/)		

Form	990 (2017)					Page 2
Par	t IIII Statement	of Program Service	e Accomplis	hments		
	Check if Sche	dule O contains a respo	onse or note to	any line in this Part III .		🗆
1	Briefly describe the o	organization's mission				
PRON	OTE ECONOMIC PROS	SPERITY IN THE MUSHE	ROOM INDUSTR	Y		
_	D. J. H				-l	
2	-			vices during the year which		☐ Yes ☑ No
		r 990-EZ? ese new services on Sch				∟ Yes ⊻ No
3	Did the organization					
,	services?	☐ Yes ☑ No				
	If "Yes," describe the		La res La no			
4	Describe the organization 501(c)(3) an	ation's program service	accomplishmer	to report the amount of	rgest program services, as measi grants and allocations to others, t	
4a	(Code) (Expenses \$	1,380,690	including grants of \$) (Revenue \$	1,159,050)
	See Additional Data					
4b	(Code) (Expenses \$		including grants of \$) (Revenue \$)
4c	(Code) (Expenses \$		including grants of \$) (Revenue \$)
4d		ces (Describe in Schedi	•			
	(Expenses \$		uding grants of	·) (Revenue \$)
4e	Total program serv	vice expenses >	1,380,6	90		Form 990 (2017)

Yes

Yes

Yes

Yes

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Nο

Nο

No

Form **990** (2017)

Form 990 (2017)

or X as applicable

Section 501(c)(3) organizations.

If "Yes," complete Schedule C, Part III 🕏 .

711	J
Is th	e or
Sche	dule

Checklist of Required Schedules ganization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complet*e

Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year?

Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right

Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation

Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments,

Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its

d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported

Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏

Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses

the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🛸

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🕏

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments

valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV

total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 🛸

b Was the organization included in consolidated, independent audited financial statements for the tax year?

Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total

permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🛸 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX,

5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,

Did the organization receive or hold a conservation easement, including easements to preserve open space,

the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 🛸 🔒 . Did the organization maintain collections of works of art, historical treasures, or other similar assets?

assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🛸

to provide advice on the distribution or investment of amounts in such funds or accounts?

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

12a Did the organization obtain separate, independent audited financial statements for the tax year?

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the United States? . . .

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)

lines 1c and 8a? If "Yes," complete Schedule G, Part II

foreign organization? If "Yes," complete Schedule F, Parts II and IV

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

assessments, or similar amounts as defined in Revenue Procedure 98-19?

Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? . . . Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates

33

No

Page 4

Part IV	Checklist of Required Schedules (continued)

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . .

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic

Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX.

Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's

24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and

current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes,"

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

column (A), line 2? If "Yes," complete Schedule I, Parts I and III

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

instructions for applicable filing thresholds, conditions, and exceptions)

officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . .

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?

Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part

An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note.

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . .

government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

20a 20b

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25b

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Yes

Form **990** (2017)

Yes

Nο

Nο Nο

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Nο

Nο

No

No

Nο

Nο

No

Nο

Nο

Nο

Nο

No

No

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

orm	990 (2017)			Page		
Par	t V Statements Regarding Other IRS Filings and Tax Compliance					
	Check if Schedule O contains a response or note to any line in this Part V					
			Yes	No		
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 0					
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0	.				
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c				
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return					
L	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes			
U	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		103			
За	Did the organization have unrelated business gross income of $$1,000$ or more during the year?	3a		No		
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b				
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?					
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No		
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No		
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		-			
-		5c				
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b				
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b				
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No		
d	If "Yes," indicate the number of Forms 8282 filed during the year					
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		No		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		No		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8				
۵-	Did the sponsoring organization make any taxable distributions under section 4966?	9a				
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b				
0	Section 501(c)(7) organizations. Enter	90				
	Initiation fees and capital contributions included on Part VIII, line 12 10a					
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b					
1	Section 501(c)(12) organizations. Enter	1				
	Gross income from members or shareholders					
	Gross income from other sources (Do not net amounts due or paid to other sources	1				
	against amounts due or received from them)					
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a				
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b					
.3	Section 501(c)(29) qualified nonprofit health insurance issuers.					
	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a				
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans					
С	Enter the amount of reserves on hand					
45	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No		
- - -a		'		_		

-orm	990 (2017)			Page 6
Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions	" respo	nse to li	
	Check if Schedule O contains a response or note to any line in this Part VI			<u> </u>
Se	ction A. Governing Body and Management			
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 3		Yes	No
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 3			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenu	e Code	e.)	
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe in Schedule O how this was done</i>	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?			
_	· · · · · · · · · · · · · · · · · · ·	16b		L
	List the States with which a copy of this Form 990 is required to be filed.			
17	List the States with which a copy of this Form 990 is required to be filed.			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply			
19	Own website Another's website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records DEVON OFFICE CENTER FIVE STATION AVE SUITE 205 BERWYN, PA 19312 (610) 296-4211			
				A (2017)

Form 990 (2	017)										Page 7
Part VII	Compensation of Officers, D and Independent Contractor		stees	, Key	/ Er	npl	oyee	s, F	lighest Compe	nsated Employ	ees,
	Check if Schedule O contains a resp	onse or note to	any lii	ne in	this	Part	t VII				🗆
Section	A. Officers, Directors, Truste	es, Key Emp	loyee	s, aı	nd I	Hig	hest	Con	mpensated Emp	oloyees	
year ● List all	e this table for all persons required to of the organization's current officers	s, directors, tru	stees (1	wheth	nerı	ndıv	ıduals		,		ganızatıon's tax
·	ation Enter -0- in columns (D), (E), a	` '	•			•					
	of the organization's current key em								, , ,		
who received	organization's five current highest of d reportable compensation (Box 5 of and any related organizations										
of reportable	of the organization's former officers, e compensation from the organization	n and any rélate	ed orga	nızatı	ons	•		·	•	·	,000
organization	of the organization's former director , more than \$10,000 of reportable co	mpensation fro	m the	orgar	nizat	ion	and ar	ıy re	elated organization:	S	
	in the following order individual trus d employees, and former such persoi		rs, msc	itutio	nai	trusi	ees, c	TITICE	ers, key employees	s, nignest	
☐ Check t	his box if neither the organization no	r any related o	rganıza	tion c	omp	ens	ated a	iny c	current officer, dire	ctor, or trustee	
	(A) Name and Title	(B) Average hours per week (list any hours for related	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)				ss pen r a nd a	son	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
		organizations below dotted line)	Individual trustee or director	Institutional Trust ys	Officei	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	related organizations
(1) EDWARD L	.EO	1 00	х						0	0	C
(2) STEVEN PR	HILLIPS	1 00	х						0	0	C
(3) ROBERT F	ERRANTO	1 00	х						0	0	C
(4) JOHN R CF	ROOKS		0	22,299							

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

compensation from the organization >

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Form 990 (2017)				Page 10
Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all co	olumns All other orga	anizations must comp	elete column (A)	
Check if Schedule O contains a response or note to any	line in this Part IX	<u></u>		🗆
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21				
2 Grants and other assistance to domestic individuals See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	83,077	83,077		
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages				
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	14,560	14,560		
9 Other employee benefits	7,739	7,739		
10 Payroll taxes	6,398	6,398		
11 Fees for services (non-employees)				
a Management				
b Legal	1,231,335	1,231,335		
c Accounting				
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12 Advertising and promotion				
13 Office expenses	3,795	3,795		
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel	328	328		
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
· · · · ·	2,076	2,076		
19 Conferences, conventions, and meetings	2,070	2,070		
20 Interest				
21 Payments to affiliates	474	474		
22 Depreciation, depletion, and amortization		474		
23 Insurance	7,236	7,236		
a PROFESSIONAL FEES	9,700	9,700		
b ADMINISTRATION	8,730	8,730		
c REIMBURSABLE EXPENSES	3,636	3,636		
d TELEPHONE	1,551	1,551		
e All other expenses	55	55		
25 Total functional expenses. Add lines 1 through 24e	1,380,690	1,380,690	C	0
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

Form **990** (2017)

2

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11

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16

17

18

19

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32

34

Liabilities 22

Fund Balances

5

Assets 31

Set 33

Check if Schedule O contains a response or note to any line in this Part IX .

10a Land, buildings, and equipment cost or other

Investments—publicly traded securities .

Investments—other securities See Part IV, line 11 .

Total assets. Add lines 1 through 15 (must equal line 34) . .

Escrow or custodial account liability Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties . . .

Unsecured notes and loans payable to unrelated third parties

Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here ▶ 🗹 and

Investments-program-related See Part IV, line 11

Other assets See Part IV, line 11 . . .

Accounts payable and accrued expenses .

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17-24)

Total liabilities.Add lines 17 through 25 . .

Total liabilities and net assets/fund balances .

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958),

check here ▶ 🔲 and complete lines 30 through 34.

Capital stock or trust principal, or current funds

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Tax-exempt bond liabilities

basis Complete Part VI of Schedule D

Intangible assets

Grants payable . . .

Deferred revenue

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Unrestricted net assets

Less accumulated depreciation

Cash-non-interest-bearing					•				
Savings and temporary cash	ınv	estr	nent	s					
Pledges and grants receivable	e, n	et							

2 3 104.838 4 5

229,053

1

(A)

Beginning of year

Page **11**

315,167

28.318

4,200

1,203

348.888

157,297

157.297

191.591

191,591

348,888 Form **990** (2017)

(B)

End of year

Loans and other receivables from current and former officers, directors,

9,989

8,786

4,200

916

339.007

117,904

117.904

221,103

221,103

339,007

10c

11

12

13

14

15

16

17 18

19

20

21

22 23

24

25

26

27

28

29

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31

32

33

34

trustees, key employees, and highest compensated employees Complete Part Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) 6 voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L . . . Assets Notes and loans receivable, net . 7 Inventories for sale or use . 8 Prepaid expenses and deferred charges . 9

10a

10b

If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both

2b

3b

Yes

Yes

Nο

Form 990 (2017)

☐ Both consolidated and separate basis Separate basis Consolidated basis

✓ Separate basis Both consolidated and separate basis Consolidated basis c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight

of the audit, review, or compilation of its financial statements and selection of an independent accountant? 2c

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis,

b Were the organization's financial statements audited by an independent accountant?

consolidated basis, or both

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Audit Act and OMB Circular A-133? **3**a

Additional Data

Software ID:

Software Version:

EIN: 23-3067037

Name: AMERICAN MUSHROOM COOPERATIVE

DEVELOPMENT OF A HIGHER DEGREE OF EFFICIENCY

Form 990 (2017)

Form 990, Part III, Line 4a:

THE BETTERMENT OF THE CONDITIONS OF THOSE ENGAGED IN THE PURSUIT OF MUSHROOM FARMING, THE IMPROVEMENT OF THE GRADE OF MUSHROOMS, AND THE

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

DLN: 93493135089728OMB No 1545-0047

2017

AUI /

Department of the Treasury Internal Revenue Service

EZ)

SCHEDULE C (Form 990 or 990-

►Complete if the organization is described below. ►Attach to Form 990 or Form 990-EZ. ►Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

• S • S If the • S • S If the (Pro)	ection 501(c)(3) organizations Cor Section 501(c) (other than section 5 Section 527 organizations Complet e organization answered "Yes" of Section 501(c)(3) organizations that section 501(c)(3) organizations that e organization answered "Yes" of ky Tax) (see separate instruction Section 501(c)(4), (5), or (6) organization	n Form 990, Part IV, Line 4, or Form 99 thave filed Form 5768 (election under so thave NOT filed Form 5768 (election un n Form 990, Part IV, Line 5 (Proxy Tax s), then	Part I-C I-A and C below 90-EZ, Part VI, Imection 501(h)) Co der section 501(h)	Do not co ne 47 (Lob mplete Pa n) Comple	mplete Part I-E bying Activiti rt II-A Do not te Part II-B Do ss) or Form 99	Bies), then complete Par o not complet 90-EZ, Part V	rt II-B te Part ', line :	35 c
	ne of the organization RICAN MUSHROOM COOPERATIVE				Employer ide	entification	numb	er
7 11 12					23-3067037			
Par	t I-A Complete if the organ	nization is exempt under section	n 501(c) or is	a sectio	n 527 orgar	nization.		
1	Provide a description of the organ "political campaign activities")	ization's direct and indirect political cam	paign activities in	Part IV (s	see instructions	s for definitio	n of	
2	Political campaign activity expend	itures (see instructions)			>	\$		
3	Volunteer hours for political camp	aign activities (see instructions)						
Par	t I-B Complete if the orga	nization is exempt under section	n 501(c)(3).					
1	Enter the amount of any excise ta	ex incurred by the organization under se	ction 4955		>	\$		
2	Enter the amount of any excise ta	ex incurred by organization managers ur	der section 4955		>	\$		
3	If the organization incurred a sect	ion 4955 tax, did it file Form 4720 for th	his year?				0.0	□ No
4a	Was a correction made?					□ Y		□ No
ь	If "Yes," describe in Part IV							
Par	t I-C Complete if the orga	nization is exempt under section	n 501(c), exce	pt secti	on 501(c)(3	3).		
1	Enter the amount directly expend	ed by the filing organization for section	527 exempt funct	ion activiti	es 🕨	\$		
2	Enter the amount of the filing org function activities	anızatıon's funds contributed to other or	ganizations for se	ction 527	exempt >	\$		
3	Total exempt function expenditure	es Add lines 1 and 2 Enter here and on	Form 1120-POL,	line 17b	•	¢		
4	Did the filing organization file For	m 1120-POL for this year?				→	es	□ No
5	organization made payments For of political contributions received	employer identification number (EIN) of each organization listed, enter the amo that were promptly and directly delivere ee (PAC) If additional space is needed,	unt paid from the d to a separate p	filing orga olitical org	nization's fund anization, such	ds Also enter	the a	
	(a) Name	(b) Address	(c) EIN	`filing o	ount paid from organization's If none, enter -0-	contribu and pr directly separa organiza	tions r romptli deliver ate pol	eceived y and red to a litical if none,
1								
2								
3								
4								
5								
6								

Schedule C (Form 990 or 990-EZ) 2017

Grassroots lobbying expenditures

В	Check If the filing organization checked box A and "limited control" provisions apply							
	Limits on Lobbying (The term "expenditures" means		(a) Filing organization's totals	(b) Affiliated group totals				
1a	Total lobbying expenditures to influence public opinion	on (grass roots lobbying)						
b	Total lobbying expenditures to influence a legislative							
C	Total lobbying expenditures (add lines 1a and 1b)							
d	Other exempt purpose expenditures							
e	Total exempt purpose expenditures (add lines 1c and	i 1d)						
f	Lobbying nontaxable amount Enter the amount from columns	n the following table in both						
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:						
	Not over \$500,000	20% of the amount on line 1e						
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000						
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000						
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000						
	Over \$17,000,000	\$1,000,000						
		•						

d	Other exempt purpose expenditures			
е	Total exempt purpose expenditures (add lines 1c and	d 1d)		
f	Lobbying nontaxable amount Enter the amount from columns	n the following table in both		
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:]	
	Not over \$500,000	20% of the amount on line 1e	j	
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000]	
	Over \$17,000,000	\$1,000,000	1	
	C	20		
g	Grassroots nontaxable amount (enter 25% of line 1f)		
h	Subtract line 1g from line 1a If zero or less, enter -	0-		
i	Subtract line 1f from line 1c If zero or less, enter -0)-		
j	If there is an amount other than zero on either line section 4911 tax for this year?	1h or line 1i, did the organization file Form 477	20 reporting	Yes 🗌 No
4				

4-Year Averaging Period Under section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year **(b)** 2015 (d) 2017 (a) 2014 (c) 2016 (e) Total beginning in) Lobbying nontaxable amount

Lobbying ceiling amount (150% of line 2a, column(e)) Total lobbying expenditures Grassroots nontaxable amount

Grassroots ceiling amount (150% of line 2d, column (e))

Schedule C (Form 990 or 990-EZ) 2017

Page 2

If "Yes," enter the amount of any tax incurred under section 4912

Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes?

Schedule C (Form 990 or 990-EZ) 2017

Part II-B

Volunteers?

Media advertisements?

Other activities?

Total Add lines 1c through 1i

501(c)(6).

answered "Yes."

Dues, assessments and similar amounts from members

Supplemental Information

expenses for which the section 527(f) tax was paid).

Taxable amount of lobbying and political expenditures (see instructions)

instructions), and Part II-B, line 1 Also, complete this part for any additional information

activity

1

2a

1

2

1

2

C 3

Part III-A

Part III-B

Current year

Total

Part IV

Carryover from last year

expenditure next year?

Return Reference

(b)

Amount

Yes During the year, did the filing organization attempt to influence foreign, national, state or local legislation. including any attempt to influence public opinion on a legislative matter or referendum, through the use of

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6)

and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is

Explanation

Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?

Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?

Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?

If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?

Did the organization agree to carry over lobbying and political expenditures from the prior year?

Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political

If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political

Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues

Were substantially all (90% or more) dues received nondeductible by members?

Did the organization make only in-house lobbying expenditures of \$2,000 or less?

Complete if the organization is exempt under section 501(c)(3) and has NOT filed

(a)

No

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section

Yes

1

2

1

2a

2b

2c

3

4 5

Schedule C (Form 990 or 990EZ) 2017

No

No

No

No

3,700

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see

efile GRAPHIC print - DO NOT PROCESS As Filed Data -SCHEDULE D

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

(Form 990)

Department of the Treasury

DLN: 93493135089728

Schedule D (Form 990) 2017

Cat No 52283D

OMB No 1545-0047

Supplemental Financial Statements

► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990.

Internal Revenue Service Information about Schedule D (Form 990) and its instructions is at <u>www.irs.gov/form990</u>.

Open to Public **Inspection**

	me of the organization		Employer identification number
AMI	ERICAN MUSHROOM COOPERATIVE		23-3067037
Ρā	art I Organizations Maintaining Donor Advi	sed Funds or Other Similar Funds	- 1
	Complete if the organization answered "Ye		
		(a) Donor advised funds	(b)Funds and other accounts
	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
ļ	Aggregate value at end of year		
•	Did the organization inform all donors and donor adviso organization's property, subject to the organization's ex		advised funds are the
5	Did the organization inform all grantees, donors, and do charitable purposes and not for the benefit of the donor private benefit?		
Pa	rt II Conservation Easements. Complete if th	ie organization answered "Yes" on Fo	
	Purpose(s) of conservation easements held by the organ	_	
	Preservation of land for public use (e.g., recreation	n or education)	in historically important land area
	Protection of natural habitat	· —	certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year	qualified conservation contribution in the f	
а	Total number of conservation easements		Held at the End of the Year
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified historic	2c	
d	Number of conservation easements included in (c) acqui	· ·	2d
ł	structure listed in the National Register Number of conservation easements modified, transferre tax year >	d, released, extinguished, or terminated b	y the organization during the
Ļ	Number of states where property subject to conservation	n easement is located ►	
;	Does the organization have a written policy regarding that and enforcement of the conservation easements it holds		g of violations, Yes No
,	Staff and volunteer hours devoted to monitoring, inspec	ting, handling of violations, and enforcing	conservation easements during the year
,	Amount of expenses incurred in monitoring, inspecting, \$	handling of violations, and enforcing conse	ervation easements during the year
3	Does each conservation easement reported on line 2(d) and section $170(h)(4)(B)(II)^{2}$	above satisfy the requirements of section	170(h)(4)(B)(ı) ☐ Yes ☐ No
)	In Part XIII, describe how the organization reports cons balance sheet, and include, if applicable, the text of the the organization's accounting for conservation easemen	footnote to the organization's financial sta	ense statement, and
aı	t III Organizations Maintaining Collections Complete if the organization answered "Ye	of Art, Historical Treasures, or Ot	her Similar Assets.
.a	If the organization elected, as permitted under SFAS 11 art, historical treasures, or other similar assets held for provide, in Part XIII, the text of the footnote to its finan	public exhibition, education, or research in	
b	If the organization elected, as permitted under SFAS 11 historical treasures, or other similar assets held for publ following amounts relating to these items	6 (ASC 958), to report in its revenue state	
((i) Revenue included on Form 990, Part VIII, line 1		▶ \$
	ii)Assets included in Form 990, Part X		· <u></u>
:	If the organization received or held works of art, historic following amounts required to be reported under SFAS:		ancial gain, provide the
а	Revenue included on Form 990, Part VIII, line 1	tro (ADC 930) relating to these items	▶ \$
	·		*
b	Assets included in Form 990, Part X		▶ \$

Par	t III	Organizations Ma	aintaining Col	lections of	Art, His	stori	cal Tr	easu	ıres, oı	r Other	Similar /	Assets (contin	ued)
3		the organization's acquired (check all that apply)	uisition, accessioi	n, and other i	recor d s, cl	heck a	an y of	the fo	llowing t	:hat are a	sıgnıfıcant	use of it	s colle	ction
a		Public exhibition				d		Loan	or excha	ange prog	rams			
b		Scholarly research				e		Othe	r					
С		Preservation for future	generations											
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII													
5	During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?													
Pa	rt IV	Escrow and Custo Complete if the ord X, line 21.			on Form	990	, Part	IV, lı	ne 9, o	r reporte	ed an amo			
1a		organization an agent ed on Form 990, Part)		an or othe r ır	ntermedia	ry for	contril	oution	s or othe	er assets I	not	☐ Y€	es	□ No
b	If "Ye	s," explain the arrange	ement in Part XIII	and complet	e the follo	wing	table					Amount		
C	Begini	ning balance								1c				
d	Addıtı	ons during the year								1d				
е	Distrib	outions during the year	•							1e				
f	Ending	g balance								1f				
2a	Did th	e organization include	an amount on Fo	rm 990, Part	X, line 21	l, for e	escrow	or cu	ıstodı al a	ccount lia	bility?			 □ No
b	If "Ye:	s," explain the arrange	ment in Part XIII	Check here	ıf the exp	lanatı	on has	been	provide	d in Part)	KIII			
Pa	rt V	Endowment Fund	ds. Complete ıf			swer	ed "Ye	es" or	n Form	990, Par				
	_			(a)Current	year	(b)Pr	or yea	r	(c)Two y	ears back	(d)Three y	ears back	(e) Fo	ur years back
	_	ing of year balance												
		utions						_						
		estment earnings, gain	ns, and losses											
		or scholarships	•	-										
е		expenditures for facilities ograms	es											
f	Adminis	strative expenses .												
g	End of	year balance												
2	Provid	de the estimated percei	ntage of the curre	ent year end	balance (I	ıne 1 <u>c</u>	g, colui	mn (a)) held a	s				
а	Board	designated or quasi-e	ndowment 🟲											
b	Perma	anent endowment 🕨												
С	Temp	orarily restricted endov	vment ▶											
	The p	ercentages on lines 2a,	, 2b, and 2c shou	ld equal 100°	%									
За		nere endowment funds ization by	not in the posses	sion of the o	rganızatıo	n that	are h	e ld a n	d admını	istered fo	r the		Г	Yes No
	(i) un	related organizations											a(i)	
(ii) related organizations														
4	Descr	ibe in Part XIII the inte	ended uses of the	organization	's en dow n	nent f	unds							
Pa	rt VI	Land, Buildings,												
	Descri	Complete If the orderion of property	ganization ansv (a) Cost or oth (investme	ner basıs	on Form (b) Cost or						m 990, P lepreciation			k value
1a	Land											+		
	Building	ŀ												
		old improvements												
		nent						9,989			8,786	;		1,203
	Other	ŀ		+				,			-,. 00			
		ines 1a through 1e (Co	olumn (d) must e	aual Form 99	0 Part X	colun	nn (B)	line	10(c))		-			1.203

Part VII Investments—Other Securities. Complete if the org	janizati	on answ	ered "Yes" on Form 990,	Part IV, line 11b.
See Form 990, Part X, line 12. (a) Description of security or category (including name of security)		(b) Book value	(c) Method Cost or end-of-y	of valuation ear market value
(1) Financial derivatives	· -			
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)	+			
(H)				
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	•			
Part VIII Investments—Program Related. Complete if the organization answered 'Yes' on Form 9		rt IV, lır	ne 11c. See Form 990, Pa (c) Method	<u> </u>
	(-,			ear market value
(1)				
(2)				
		-		
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) Part IX Other Assets. Complete if the organization answered 'Yes' of the organization and the organiza	on Form	990, Pa	rt IV, line 11d See Form 99	0, Part X, line 15
(a) Description				(b) Book value
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				+
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)				•
Part X Other Liabilities. Complete if the organization answer See Form 990, Part X, line 25.	red 'Ye	s' on Fo	rm 990, Part IV, line 11e	or 11f.
1. (a) Description of liability		(b) Bo	ook value	
(1) Federal income taxes				
(2)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	▶	+0 +1-	gangation's fire	onte that veneral the
2. Liability for uncertain tax positions. In Part XIII, provide the text of the foorganization's liability for uncertain tax positions under FIN 48 (ASC 740).			text of the footnote has bee	

2

b

Schedule D (Form 990) 2017

Total revenue, gains, and other support per audited financial statements . . .

Amounts included on line 1 but not on Form 990, Part VIII, line 12

Net unrealized gains (losses) on investments

Donated services and use of facilities .

Recoveries of prior year grants . .

1

Page 4

d	Other (Describe in Part XIII) .		2d				
е	Add lines 2a through 2d			2e			
3	Subtract line 2e from line 1 .			3	1,351,178		
4	Amounts included on Form 990, P	Part VIII, line 12, but not on line 1					
а	Investment expenses not included	d on Form 990, Part VIII, line 7b .	4a				
b	Other (Describe in Part XIII) .		4b				
c	Add lines 4a and 4b			4c			
5	Total revenue Add lines 3 and 4d	c. (This must equal Form 990, Part I, line 12)	5	1,351,178		
Par		penses per Audited Financial Stater Ization answered 'Yes' on Form 990, Pai	•	er Return.			
1	Total expenses and losses per aud	dited financial statements		1	1,380,690		
2	Amounts included on line 1 but no	ot on Form 990, Part IX, line 25					
а	Donated services and use of facili	ties	2a				
b	Prior year adjustments		2b				
c	Other losses		2c				
d	Other (Describe in Part XIII) $$.		2d				
е	Add lines 2a through 2d			2e			
3	Subtract line 2e from line 1 .			3	1,380,690		
4	Amounts included on Form 990, P	Part IX, line 25, but not on line 1:					
а	Investment expenses not included	d on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIII) .		4b				
c	Add lines 4a and 4b			4c			
5	Total expenses Add lines 3 and 4	4c. (This must equal Form 990, Part I, line 18	8)	5	1,380,690		
Pa	t XIIII Supplemental Info	rmation					
		art II, lines 3, 5, and 9, Part III, lines 1a and 3 and 4b Also complete this part to provide		Part V, line 4, Par	t X, line 2, Part		
	Return Reference		Explanation				
ee .	e Additional Data Table						

2a

2b

2с

Schedule D (For	rm 990) 2017	Page 5	
Part XIII	Supplemental Ir	ormation (continued)	
Retu	ırn Reference	Explanation	
		Schedule D (Form 990) 2017	

Additional Data

Software ID:

Software Version:

EIN: 23-3067037

Name: AMERICAN MUSHROOM COOPERATIVE

Supplemental Information

Return Reference	Explanation
Return Reference SCHEDULE D, PAGE 3, PART X	AMERICAN MUSHROOM COOPERATIVE IS EXEMPT FROM FEDERAL AND STATE INCOME TAXES UNDER THE PROV ISIONS OF SECTION 501(C)(5) OF THE INTERNAL REVENUE CODE, THEREFORE, NO PROVISION FOR INCO ME TAXES HAS BEEN MADE IN THE FINANCIAL STATEMENTS ALTHOUGH THE ENTITY IS NOT SUBJECT TO FEDERAL AND STATE INCOME TAXES, THE ENTITY WAS REQUIRED TO ADOPT ASC 740, "ACCOUNTING FOR INCOME TAXES, WHICH APPLIES TO ALL ENTITIES INCLUDING THOSE THAT ARE TAX EXEMPT UNDER 501(C) (5) ASC 740 CLARIFIES THE ACCOUNTING AND REPORTING FOR INCOME TAXES WHERE INTERPRETATI ON OF THE TAX LAW MAY BE UNCERTAIN ASC 740 PRESCRIBES A COMPREHENSIVE MODEL FOR THE FINAN CIAL STATEMENTS RECOGNITION, MEASUREMENT, PRESENTATION AND DISCLOSURE OF INCOME TAX UNCERTAINTIES WITH RESPECT TO POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN INCOME TAX RETURNS MAN AGEMENT HAS REVIEWED ITS CURRENT AND PAST FEDERAL INCOME TAX POSITIONS AND HAS DETERMINED, BASED ON CLEAR AND UNAMBIGUOUS TAX LAW AND REGULATIONS, THAT THE TAX POSITIONS TAKEN ARE
	CERTAIN AND THAT THERE IS NO LIKELIHOOD THAT A MATERIAL TAX ASSESSMENT WOULD BE MADE IF THE RESPECTIVE GOVERNMENT AGENCY EXAMINED TAX RETURNS SUBJECT TO AUDIT ACCORDINGLY, NO PROVISION FOR THE EFFECTS OF UNCERTAIN TAX POSITIONS HAS BEEN RECORDED THE DECEMBER 31, 2014, 2015 AND 2016 TAX YEARS ARE OPEN AND SUBJECT TO EXAMINATION BY THE INTERNAL REVENUE SERVICE HOWEVER, THE ENTITY IS NOT CURRENTLY UNDER AUDIT NOR HAS THE ENTITY BEEN CONTACTED BY THIS JURISDICTION ANY INTEREST AND PENALTIES INCURRED AS A RESULT OF AN INCOME TAX EXAMINATION WOULD BE RECORDED AS INCOME TAX EXPENSE THERE ARE NO INTEREST AND PENALTIES AS OF DECEMBER 31, 2017 AND 2016

efile GRAPH	IIC print	- DO NOT PROCESS As Filed Data -	DL	N: 93493135089728
SCHEDULE O (Form 990 or 990- EZ) Department of the Treasury		Supplemental Information to Form 9 Complete to provide information for responses to spe Form 990 or 990-EZ or to provide any additional Attach to Form 990 or 990-EZ. Information about Schedule O (Form 990 or 990-EZ) an www.irs.gov/form990.	cific questions on information.	OMB No 1545-0047 2017 Open to Public Inspection
Name of the organization AMERICAN MUSHROOM COOPERATIVE 990 Schedule O, Supplemental Information		Employer identification number 23-3067037		
Return Reference	(0,544)	Explanation		
FORM 990, PAGE 6, PART VI, LINE 11B	REVIEW	ED BEFORE FILED		

Return Explanation
Reference
FORM 990. PRIOR TO THE ANNUAL MEETING THE BOARD REVIEWS THE CONFLICT OF INTEREST POLICY

FORM 990, PRIOR TO THE ANNUAL MEETING THE BOARD REVIEWS THE CONFLICT OF INTEREST POLICY PAGE 6, PART VI.

990 Schedule O. Supplemental Information

LINE 12C

Return Explanation
Reference

FORM 990, COMPENSATION IS DETERMINED BY THE BOARD OF DIRECTORS AND IS COMPARABLE TO OTHER CHIEF PART VI, I LINE 15A

990 Schedule O. Supplemental Information

Return
Reference

Explanation

COMPENSATION IS REVIEWED AND DETERMINED BY THE BOARD OF DIRECTORS

990 Schedule O. Supplemental Information

LINE 15B

FORM 990, COMPENSATION IS REVIEWED AND DETERMINED BY THE BOARD OF DIRECTORS
PAGE 6,
PART VI.

990 Schedule O, Supplemental Information Return Explanation Reference FORM 990. AVAILABLE UPON REQUEST PAGE 6, PART VI, LINE 19